

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10529,448
	Filing Date	10/11/2005
	First Named Inventor	Kurt A. Seibold
	Art Unit	3636
	Examiner Name	Erika P. Garrett
	Attorney Docket Number	026032-4893

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 50659

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number:

50659

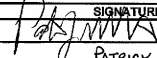
OR

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record	
Signature	
Name	PATRICK NETTESHEIM
Date	February 7, 2008
Telephone	734/254-7330

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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